State of California—Health and Welfare Agency Form Approved OMB No. 2050—0039 (Expires 9-30-88) Please print or type. (Form designed for use on elite (12-pitch typewriter). Department of Health Services
Toxic Substances Control Division
Secremento, Calfornia

L I T Y	20. Facility Owner or Operator Certification of receipt of hazardou Printed/Typed Name	s materials covered by this man	nifest except	as noted in	Item 19.		Month Day	
F A C								
T E R	Printed/Typed Name  19. Discrepancy Indication Space	Signature						
P O R	18. Transporter 2 Acknowledgement of Receipt of Materials	Signature	· · · · · · · · · · · · · · · · · · ·				Month Day	
A N S	Printed/Typed Name RICHARD SENTENO	Twhand?	Jon to	no			06 PA	
T	17. Transporter 1 Acknowledgement of Receipt of Materials	Signature /	Λ .			1 1	Month Day	
X	Printed/Typed Name / WAYNE RAWS	Signature	100	J/A	usa		Month Day.	
	determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available method minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a gor faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
	international and national government regulations.							
	16.  GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipp name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applic							
	GLOVES, GOGGLES							
	15. Special Handling Instructions and Additional Information							
	A WASH THINNER			c.	01 01	d.	01	
	J. Additional Descriptions for Materials Listed Above		_ <b></b>	K. Handling Codes for Wastes Listed Above a. DCC7				
			1 1		1111		EPA/Other	
	d						State	
1							EPA/Other	
T O B	c.		101	DIR	1 150	G	State	
R A	WASTE 111 TRICHLOROETHANE ORM-A	UN 2831		215	GALS	_	211 EPA/Other	
N	b. VICENTE LLL MIDT GIVE OPONIMIANTE OPIN A	TIN 0023	1012	DR	1 12/010	G	State	
G E	a FLAMMABLE, COMPOUND THINNING LIC	COLD, NALL42	A		GALS		214 DO	
1	11. US DOT Description (Including Proper Shipping Name, Hazard  a. FLAMMARI.F. COMPOLIND THINNING L.T.C.		No.	Туре		Wt/Vo		
			12. Conta		3) 698-0 13. Total Quantity	14. Unit	Waste No	
	12504 E. Whittier Blvd. Whittier, CA 90602  C A D 0 4 2 2 4 5 0 0 1			H. Facility's Phone 213) 698-0991				
	OMEGA RECOVERY							
	9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's				لقعة المشخصين بين يستسر أجوجها والسري		nd distributed as a second of the	
	7. Transporter 2 Company Name 8. US EPA ID Number				E. State Transporter's ID			
	5. Transporter 1 Company Name 6. US EPA ID Number BETTERBILT CHEMICALS, INC.  C  A  D  9 8  1 6 8 6 2 4 9			D. Transporter's Phone 213-949-066				
	4. Generalor's Phone ( 818) 709-8505				C AD918116149121131			
	21045 Osborne, Canoga Park, CA 91304				B. State Generator's ID			
1	3. Generator's Name and Mailing Address QUALITY FABRICATORS			A. State Manifest Document Number				